

**Internet Extra Work Bill (iEWB) System
USER ACCOUNT REQUEST FORM**

DATE _____

ACCOUNT NAME _____
Last Name First Name

POSITION _____ E-mail Address _____

OFFICE PHONE _____ MOBILE PHONE _____

FAX _____

ORGANIZATION NAME _____

ADDRESS _____

DISTRICT _____

LOCATION / AREA DESC _____

IMPORTANT:

Contract will not be assigned to the USER until the District iCAS Administrator receives a completed copy of the following forms:

- (1) CEM-4904 Caltrans Authorization for Using Internet Extra Work Bill System
- (2) CEM-4905 Contractor Authorization To Use Internet Extra Work Bill System

Accounts will not be activated until USER has been trained.

~~~~~ FOR CALTRANS USE ONLY ~~~~~

Account Created

By \_\_\_\_\_

Date \_\_\_\_\_

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# Internet Extra Work Bill (iEWB) System USER ACCOUNT REQUEST FORM

## INSTRUCTIONS IN COMPLETING THE FORM

|                      |                                                                                                                                                                       |
|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| DATE                 | Enter DATE when form is completed                                                                                                                                     |
| ACCOUNT NAME         | Enter LAST and FIRST NAME of USER                                                                                                                                     |
| POSITION             | Enter job title or assignment in the organization                                                                                                                     |
| E-MAIL ADDRESS       | Enter preferred address to receive electronic mail                                                                                                                    |
| ORGANIZATION NAME    | Enter company or Caltrans' organization                                                                                                                               |
| ADDRESS              | Enter company or Caltrans' organization complete address                                                                                                              |
| DISTRICT             | For Contractors: Enter the first 2-digit of the contract number approved for work<br>(i.e. 04-123456 = enter: 04)<br><br>For Caltrans Staff: Enter Region or District |
| LOCATION / AREA DESC | Enter ADDITIONAL information on the physical location (i.e., Contractor's Office, Field Office, Farmer's Market I, etc.)                                              |